

DECLARATION FOR UTILITY PATENT APPLICATION

Attorney Docket No.: 071.0001

Application Serial No.-:

Filed:

First Named Inventor: **Michael SOROTZKIN**

Title of the Application: **SYSTEM AND METHOD FOR CONFIRMING SPECIFICATION OF INTENDED ELECTRONIC MAIL MESSAGE RECIPIENTS**

As a below-named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention which is entitled: **SYSTEM AND METHOD FOR CONFIRMING SPECIFICATION OF INTENDED ELECTRONIC MAIL MESSAGE RECIPIENTS**, the specification of which is attached hereto.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims.

I acknowledge the duty to disclose information, which is material to patentability as defined in Title 37 Code of the Federal Regulations, section 1.56.

As a named inventor, I hereby appoint the following registered practitioner to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Erik B. Cherdak
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: **Michael SOROTZKIN**

Inventor's Signature: _____ Date: _____

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Name of Second Inventor:

Inventor's Signature: _____ Date: _____

Residence City: _____ State: _____ Country : _____ Citizenship: _____

Post Office Address: _____

Is an **ADDITIONAL INVENTOR'S FORM** attached? Y___ N X